

APPLICATION OR WORKS NUMBER
091219071

CLAIMS AS FILED - PART 1

FOR	NUMBER FREQUENT	NUMBER EXTRU
BASIC FEE (3) CFR 1.10(c)(1)		
TOTAL CLAIMS (3) CFR 1.10(c)(1)	46	minus 20 =
INDEPENDENT CLAIMS (3) CFR 1.10(c)(1)	4	minus 3 =
MULTIPLE DEPENDENT CLAIM PRESENT		(3) CFR 1.10(d))

If the difference in column 1 is less than zero, enter '0' in column 2.

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	FEES	RATE	FEES
1.....		1.....	
X 1.....		X 1.....	
X 1.....		X 1.....	
11.....		11.....	
TOTAL	.	TOTAL	.
OR		OR	

CLAIMS AS AMENDED - PART II

119/06.

		(Column 1)	(Column 2)		(Column 3)
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (3) CFR 1 16(2)	50	Minus	" 50	-
	Independent (3) CFR 1 16(2)	6	Minus	... 6	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (3) CFR 1 16(2)					

FIRST PRESENTATION OF MULTIPLE DEPENDENT DRAMS (11/CEB 1/16/01)

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X \$ <u>25</u>			X \$ <u>50</u>	
X \$ <u>100</u>			X \$ <u>200</u>	
+ \$ <u> </u>			+ \$ <u> </u>	
TOTAL ADD'L FEE			TOTAL ADD'L FEE	

		(Column 1)	(Column 2)		(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER ANCHORMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (2) CFR 1.16(d)(1)	*	Minus	"	:
	Independent (2) CFR 1.16(d)(1)	*	Minus	***	:
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (2) CFR 1.16(d)(1)					

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 132 CFS | 161011

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X \$ ____ =		X \$ ____ =	
X \$ ____ =		X \$ ____ =	
X \$ ____ =		X \$ ____ =	
TOTAL ADD'L FEE		TOTAL ADD'L FEE	

	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER ALLOWANCE	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESUMED EXTRA
Total Independent Claims Equal	Minus
Independent Claims Equal	Minus

FIRST PRESENTATION IN MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
\$ ____ =		\$ ____ =	
\$ ____ =		\$ ____ =	
\$ ____ =		\$ ____ =	
TOTAL DOOL FEE		TOTAL DOOL FEE	

* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter '20'.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter '3'.
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.
Collection of information is required by 37 CFR 1.16-1F. The information is required to obtain or retain a benefit by the person which is in his (and by the
TO or process) an application. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 32 minutes to complete,
during gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments
or amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent
and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS
ADDRESS. SEE 37 CFR 1.16(b)(4); Computerization for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Figure 26.1 illustrates the relationship between the two components of the model.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney application of: Richard E. Headly, et al.
Serial No.: 09/219,071
Filing Date: December 22, 1998
Examiner: David E. England
Art Unit: 2143
Title: SYSTEM FOR SCHEDULING AND
MONITORING COMPUTER PROCESS

Entered
with
RCE
1-9-06

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

RESPONSE PURSUANT TO 37 C.F.R. § 1.116

In response to the Final Office Action mailed August 11, 2005, Applicants respectfully request the Examiner to reconsider the rejection of the claims in view of the amendments and comments as set forth below.